

## DCYF Contracted Programs

### 2019 Novel Coronavirus (COVID-19) Update

April 8, 2020

**Target Audience:** DCYF-licensed congregate care programs, which includes group homes, semi-independent living programs, assessment and stabilization centers, residential treatment programs and psychiatric residential treatment facilities (PRTFs).

#### **Purpose**

The following guidance is intended to provide direction on limiting the transmission of COVID-19 within DCYF-licensed congregate care programs if a youth presents with COVID-19 associated symptoms. Prompt detection and isolation of symptomatic youth or quarantine of potentially infectious youth is essential to prevent unnecessary exposure among other youth and staff at the facility. This guidance is based upon the most current recommendations from Governor Raimondo, the Rhode Island Department of Health (RIDOH) and the federal Centers for Disease Control and Prevention (CDC).

Please review the information in this guidance with program leadership and staff and make preparations and adjustments, as necessary.

#### **Preventive steps to prepare a site to avoid COVID-19 spread**

DCYF would like to acknowledge the tremendous hard work and diligence of provider staff to prepare for and prevent COVID-19 transmission. As overall preventive measures at congregate care programs, DCYF is recommending that sites:

- Ensure adequate supplies of food, cleaning and disinfecting products, and other provisions in case a site is quarantined for an extended period.
- Develop plans to designate specific bathrooms for exclusive use for quarantined or isolated youth. Priority needs to be given to designating bathrooms for sole use by isolated youth.
- Make all attempts to secure personal protective equipment (PPE), including gloves, gowns, masks, and eye protection. Statewide, Rhode Island is experiencing a shortage of PPE, and DCYF is aware that congregate care providers are finding it extremely difficult to obtain PPE. As soon as the department has any suggested means of obtaining PPE, we will immediately notify providers.
- Discuss plans with staff and youth ahead of time so they are prepared; this may include discussions with youth on the need to change bedrooms and bathrooms, as well as discussion of the general steps needed to prevent COVID-19 transmission.
- Have contact information for youths' physicians, RIDOH, DCYF, and families readily accessible.

- Ensure that all group home staff members wear a face mask that covers the nose and mouth. If premade masks are not available, a cloth facial cover that is sewn by hand or improvised from household items, such as scarves or t-shirts, may be used. These can be secured to the head with ties or straps or wrapped around the lower face. The primary role of a cloth face cover is to reduce the release of infectious particles into the air when someone speaks, coughs, or sneezes. Cloth facial covers are not substitutes for physical distancing, washing hands and staying home when ill. For additional information about cloth face covers, including how to make them, [see the CDC website](#).
- Ensure that all group home staff members wear appropriate PPE when interacting with youth who have tested positive for COVID-19 or who have symptoms of COVID-19. At a minimum, gloves, a surgical mask or cloth face cover, and eye protection (if available) are recommended.

### **Internal Provider Communication Plan**

Congregate care programs must develop an internal communication plan that includes protocols to:

- Notify program and site leadership immediately should a youth display COVID-19 related symptoms (this is in addition to notification requirements for RIDOH, a youth's physician and DCYF contained later in this guidance).
- Keep agency and site leadership continuously informed of current health conditions, including any deterioration in the health conditions or symptomology.
- Ensure accurate, current information-sharing among staff at a site, especially during shift changes. This is particularly important if any youth is displaying COVID-19 symptoms or has been quarantined or isolated at the site. The continuity of uniform, appropriate practice is essential between shifts.
- Notify and explain to parents or caregivers how their child is doing should they display COVID-19 symptoms or be quarantined or isolated; based upon the situation, parents or caregivers may not be allowed to visit in person, but video conferencing or other means of frequent communication should be encouraged.

### **Social Distancing**

In addition to previously issued guidance on visitation and elopement (AWOL), programs should reduce the potential exposure to and transmission of COVID-19 through implementing social distancing strategies:

- Reduce group sizes to no larger than 5 people total per group, including children and adults; DCYF recognizes this may be challenging within relatively confined congregate care sites, but please try to limit group interactions to the greatest extent possible.
- Do not combine groups for activities or at mealtimes. Maintain consistency of smaller groups day to day, whenever possible.
- If a program has multiple units (e.g., at a residential treatment facility), please restrict interactions between youth from different units.
- During interactions, the program shall ensure social distancing between each youth and staff member. As much as possible, minimize the amount of time residents and staff are in close contact with each other. The following may help:

- Plan activities that do not require close physical contact.
- Do not plan any large group activities. (Each activity should be limited to 5 total people, including staff.)
- Offer outdoor time in staggered shifts. If multiple groups are outside at the same time, they should have a minimum of 6 feet of open space between groups.
- Limit item sharing. If items are being shared, they must be cleaned after each use. Remind youth and staff to not touch their faces and wash their hands after using another individual's items.
- Eliminate family style meals and avoid congregating. If meals must be provided in a lunchroom, stagger mealtimes, arrange tables to ensure the maximum amount of possible space between youth and clean tables between lunch shifts.
- When transporting youth, maximize space between riders.

### **Additional hygiene practices**

- Require frequent handwashing, including before meals or snacks, after outside time, after going to the bathroom and after engaging in any small-group activities. Use approved hand sanitizer (with at least 60% alcohol) if hand washing is not possible. DO NOT use hand sanitizer while wearing gloves.
- Strict coughing and sneezing etiquette must be followed: into a tissue (with appropriate hand hygiene immediately afterwards), a sleeve or an elbow.
- Open windows frequently, weather permitting, and adjust the HVAC system, if one exists, to allow for more fresh air to enter program space.
- Keep windows open, if possible, in vehicles when transporting youth.

### **Cleaning and disinfecting at a site**

- Clean and then disinfect daily, at a minimum, those surfaces and objects that are touched during the day. This includes bathrooms, tables, countertops, desks, computer keyboards, video game consoles and phones.
- Certain surfaces used by multiple individuals frequently, such as doorknobs, faucet handles and tables, should be cleaned and disinfected every four (4) hours.
- Clean any surfaces involved in eating or food preparation after each use.
- Surfaces must be thoroughly cleaned to remove all organic matter before a sanitizer or disinfectant is applied for the required wet dwell time. No disinfectant or sanitizer works with organic matter. Thorough cleaning with soap, water, and a microfiber cloth will remove most microorganisms.
- Minimize the potential for the spread of germs in the program space by temporarily removing toys that are not easily cleanable, such as stuffed animals, if present. Rotate the toys that are out at any one particular time so that they can be adequately cleaned and sanitized.

## **Watch for respiratory infection and COVID-19 symptoms in youth and staff**

All program staff must be trained and knowledgeable in how to screen for COVID-19 symptoms. Programs should continuously observe youth and staff for symptomology. Staff should be formally screened verbally for COVID-19 when reporting to work. Youth should be formally screened verbally at least once a day.

Symptoms for COVID-19 may include:

- Fever (temperature of 100.4 F or higher)
- Cough
- Shortness of breath or difficulty breathing
- Body aches
- Chills
- Sore throat
- Runny nose or stuffy nose
- Headache
- Diarrhea

## **Steps if a youth is presenting with possible COVID-19 symptoms**

If a youth presents with any symptoms, please:

- Ask the youth to put on a mask and move to an isolated area of the building – potentially their bedroom, if no one else needs immediate access.
- Staff who will be within 6 feet of the youth for more than 15 minutes should wear a surgical mask (or cloth face cover if a surgical mask is unavailable), gloves, and eye protection if available.
- Call the youth's primary care physician immediately and describe the youth's symptoms. Follow the directions given by the physician.
- If necessary, the physician will perform a telehealth visit, recommend an in-person evaluation and/or order a test for COVID 19.
- Staff should wear a surgical mask (or cloth face cover if a surgical mask is unavailable), gloves, and eye protection, if available , when engaging in activities, such cleaning, that may put them in contact with surfaces and items with droplets from isolated youth.
- Testing for COVID-19 is indicated for those with symptoms who live or work in congregate settings.
- Contact the DCYF hotline at 1-800-RI-CHILD with details of the youth's symptoms and the physician's recommendations.
- The Hotline will alert the youth's team and the team will be reaching out.
- Plan to provide a daily update on the youth's status to the primary worker and their supervisor.

## **Youth Elopement/AWOL**

If a youth has eloped for longer than two hours and/or engaged in activities that may have put them in close contact with individuals outside of the program who may have been exposed to COVID-19, program staff should contact the DCYF hotline at 1-800-RI-CHILD. We are working closely with the medical staff at Lifespan to determine priority testing.

## Steps if a Youth Tests Positive

**Any positive test results should immediately be reported to the Rhode Island Department of Health (RIDOH) at 401-222-2577.** RIDOH will provide guidance on isolation, quarantine of close contacts, and additional testing. After you speak with RIDOH, please call the youth's primary worker or supervisor and the Child Abuse Hotline immediately to report the situation so DCYF can coordinate a quarantine/isolation plan to support you, consistent with the recommendations of RIDOH.

## Quarantine Guidelines

Quarantine refers to separating and restricting the movement of asymptomatic individuals who have had close contact with or were exposed to COVID-19 during a period of time when they may develop COVID-19 symptoms (also known as the incubation period).

Please follow all recommendations provided by RIDOH and the youth's physician, in consultation with DCYF. If RIDOH or a physician requests that a youth be formally quarantined, please follow all specific guidance provided by RIDOH or the physician. Additionally, when a youth is to remain at a program site, actions to be taken may include, but are not limited to, the following:

- Quarantined youth should not share a room with any other youth, if possible.
- Program sites should designate living areas for exclusive use by quarantined youth. When space is limited, this may mean identifying bedrooms that can be converted to additional living space for quarantined youth. Quarantined youth should remain in designated areas, including for taking meals, and should wear a mask or other available facial covering, if they are in any common areas.
- Time in common areas should be limited for quarantined youth.
- Staff should check temperatures and conduct a symptom check for quarantined youth each time the youth enters a common area. If space is too limited at a site to allow for a designated quarantine living area beyond a bedroom, other youth should be limited from using common space while the quarantined youth is in the space. Surfaces in the quarantined space should be disinfected after use.
- Quarantined youth can be allowed outside, but they may not engage in activities within six feet of non-quarantined youth.
- A separate bathroom should be designated for use exclusively by quarantined youth; when a quarantined youth needs to move through a program to use a bathroom, the youth should be provided with a mask. Designated bathrooms should be cleaned and disinfected twice a day, at a minimum. If the site does not have a bathroom that can be used exclusively for quarantined youth, the bathroom should be disinfected after each use, when possible. Bathroom windows should be opened, weather permitting.
- Contact by staff and other youth with the quarantined youth's personal belongings should be limited.

While a youth is quarantined, please take the youth's temperature at least twice a day and prior to entry into a common area, and immediately report any COVID-19-related symptoms. Quarantine for COVID-19 should last for a period of 14 days.

## Isolation Guidelines

Isolation refers to confining an individual confirmed or suspected to have COVID-19 to prevent contact with others and to reduce the risk of transmission.

If RIDOH or a physician requests that a youth be isolated, please follow all specific guidance provided by RIDOH or the physician. Additional measures, beyond those for quarantined youth, may include:

- Staff who will be within 6 feet of the youth for more than 15 minutes should wear a surgical mask (or cloth face cover if surgical mask unavailable), gloves, and eye protection if available.
- The health condition of any youth who is isolated must be checked hourly, unless the youth is sleeping.
- Isolated youth may not share a room with any non-isolated youth under any circumstances; this may mean that youth have to relocate to new rooms.
- Only if absolutely necessary, two or more isolated youth may share a bedroom or other living space with each other.
- Isolated youth must remain at all times in their bedroom or other living space designated for exclusive use by isolated individuals. All other youth must avoid these spaces. If a youth entering a common space cannot be avoided, the youth must wear a mask. Staff escorting a youth must wear personal protective equipment (PPE), if available, when within a 6-foot distance. All other individuals must maintain a six-foot distance and can wear a mask or cloth face cover if they choose to do so.
- Meals should be taken in the isolation bedroom or in another room designated for exclusive use by isolated youth. Disposable utensils should be used as much as possible. Otherwise, plates and utensils should be washed with soap and water after every use; plates and utensils should be handled by staff with gloved hands. PPE should be worn, if available (or a cloth face cover at a minimum if other PPE is not available) when delivering and picking up meals for those who will be within 6 feet of an isolated youth.
- A separate bathroom should be designated for use exclusively by the isolated youth; the youth must wear a mask when moving to and from the bathroom. To the greatest extent possible, staff and non-isolated youth must maintain a 6-foot distance. If the site does not have a bathroom that can be used exclusively for isolated youth, the bathroom must be fully disinfected after each use. Bathroom windows should be opened, weather permitting.
- Contact by staff and other youth with the isolated youth's personal belongings should be avoided.
- Staff should wear a mask (or cloth face cover if surgical mask unavailable), gloves, and eye protection if available when engaging in activities, such as cleaning, that may put them in contact with surfaces and items with droplets from isolated youth.
- Laundry for isolated youth should not be mixed with laundry for non-quarantined youth; gloves should be worn while doing laundry and all clothes and bedding should be washed in hot water.

## Youth Elopement/AWOL

If a youth has eloped for longer than two hours and/or engaged in activities that may have put them in close contact with individuals outside of the program who may have been exposed to COVID-19, program staff should contact the DCYF hotline at 1-800-RI-CHILD to assess whether testing will be provided.

## Critical Information Resources

- Rhode Island Department of Health (RIDOH) 24/7 hotline: **401-222-2577**
- RIDOH COVID-19 webpage: <https://health.ri.gov/covid/>
- CDC website: <https://www.cdc.gov/coronavirus/2019-ncov/summary.html>
- CDC Infection Control Basics: <https://www.cdc.gov/infectioncontrol/basics/index.html>
- CDC Guidance on Disinfecting Living Spaces: <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/disinfecting-your-home.html>
- RIDOH Guidance on At-Home Quarantine: <https://health.ri.gov/publications/factsheets/COVID19-At-Home-Quarantine.pdf>
- RIDOH Prevention Steps for People Being Tested for COVID-19: <https://health.ri.gov/publications/instructions/Prevention-Steps-for-People-Being-Tested-for-COVID.pdf>